

PM - Pain Management

PM-AP ANATOMY AND PHYSIOLOGY

OUTCOME: The patient/family will understand that the perception of pain is highly complex and individualized.

STANDARDS:

1. Explain that pain normally acts as the body's warning signal of tissue injury. This warning signal notifies the body to withdraw from the stimulus.
2. Discuss the difference between the body's physiological response to pain and the person's perception of the event.
3. Explain that tissue damage causes the release of chemicals which result in the sensation of pain. Most pain medications work by blocking these chemicals.

PM-CUL CULTURAL/SPIRITUAL ASPECTS OF HEALTH

OUTCOME: The patient/family will understand the impact and influences cultural and spiritual traditions, practices, and beliefs have on health and wellness.

STANDARDS:

1. Explain that the outcome of disease processes may be influenced by choices related to health and lifestyles, e.g., diet, exercise, sleep, stress management, hygiene, full participation in the medical plan.
2. Discuss the potential role of cultural/spiritual traditions, practices and beliefs in achieving and maintaining health and wellness.
3. Explain that traditional medicines/treatments should be reviewed with the healthcare provider to determine if there are interactions with prescribed treatment.
4. Explain that the medical treatment plan must be followed as prescribed to be effective and that some medications/treatments take time to demonstrate effectiveness.
5. Discuss that traditions, such as sweat lodges, may affect some conditions in detrimental ways. Healing customs or using a traditional healer may have a positive effect on the patient's condition.
6. Refer to clergy services, traditional healers, or other culturally appropriate resources.

PM-DP DISEASE PROCESS

OUTCOME: The patient/family will have a basic understanding of the pain symptoms, type (e.g., chronic, acute, malignant) and the causes of the patient's pain if known.

STANDARDS:

1. Explain that the patient is the primary source of information about the pain's location, quality, intensity, onset, precipitating or aggravating factors and the measures that bring relief.
2. Emphasize the importance of communicating information about the pain to the provider. Explain the pain scale and how it is used to assess the degree of pain individuals are experiencing. Discuss its use in developing a plan to manage pain.
3. Discuss that the patient's presentation of symptoms is a unique combination of the type of pain, individual experiences and sociocultural adaptive responses.
4. Explain that pain tolerance varies greatly from person to person and in the same individual under different circumstances.
5. Explain that it is very rare for patients to become addicted to drugs administered for the relief of acute pain.

PM-EQ EQUIPMENT

OUTCOME: The patient/family will have an understanding and demonstrate (when appropriate) the proper use and care of equipment.

STANDARDS:

1. Discuss the indications for and benefits of the prescribed medical equipment. Discuss the types and features of the medical equipment as appropriate.
2. Discuss and/or demonstrate the proper use, care, and cleaning of medical equipment. Participate in a return demonstration by the patient/family.
3. Discuss signs of equipment malfunction and proper action in case of malfunction as appropriate.
4. Discuss proper disposal of associated medical supplies and how to obtain additional supplies.
5. For inpatients, explain that the various alarms are to alert the medical personnel of the patient's status and/or the function of the equipment.
6. Emphasize the importance of not tampering with any medical device.

PM-EX EXERCISE

OUTCOME: The patient/family will understand the role of increased physical activity in this patient's disease process and will make a plan to increase regular activity by an agreed-upon amount.

STANDARDS:

1. Discuss medical clearance issues for physical activity.
2. Discuss the benefits of any exercise, such as improvement in well being, stress reduction, sleep, bowel regulation, and self image.
3. Discuss obstacles to a personal exercise plan and solutions to those obstacles. Assist the patient in developing a personal exercise plan.
4. Encourage the patient to increase the intensity and duration of the activity as the patient becomes more fit.
5. Refer to community resources as appropriate.

PM-FU FOLLOW-UP

OUTCOME: The patient/family will understand the importance of follow-up in the treatment of pain management.

STANDARDS:

1. Discuss the importance of follow-up care.
2. Discuss the procedure for obtaining follow-up appointments and that follow-up appointments should be kept.
3. Emphasize that full participation in the treatment plan is the responsibility of the patient/family.
4. Discuss signs/symptoms that should prompt immediate follow-up.
5. Discuss the availability of community resources and support services and refer as appropriate.

PM-L LITERATURE

OUTCOME: The patient/family will receive literature about the patient's specific disease process, pain management issues, support groups, or community resources as appropriate.

STANDARDS:

1. Provide patient/family with literature on pain management.
2. Discuss the content of the literature.

PM-LA LIFESTYLE ADAPTATIONS

OUTCOME: The patient/family will understand the lifestyle changes necessary to optimize performance of everyday activities and promote healing.

STANDARDS:

1. Explain that treatment of pain is very individualized, e.g., medication, rest, exercise, and disease-specific treatment modalities.
2. Explain that exercise and social involvement (e.g., familial, traditional, cultural) may decrease the subjective sense of pain and the depression and anger often associated with pain.
3. Review lifestyle areas that may require adaptations (e.g., diet, physical activity, sexual activity, bladder/bowel habits, role changes, communication skills, and interpersonal relationships). Discuss lifestyle changes in relation to disease progression. Review activity limitation as appropriate.
4. Discuss techniques that may reduce stress and depression such as meditation and biofeedback as appropriate. **Refer to CPM-SM.**
5. Refer to community resources as appropriate. **Refer to HPDP.**

PM-M MEDICATIONS

OUTCOME: The patient/family will verbally summarize the medication regimen and the importance of full participation with therapy.

STANDARDS:

1. Explain that chronic pain is usually irreversible and progressive, often requiring medication therapy.
2. Describe the name, strength, purpose, dosing directions, and storage of the medication.
3. Discuss the risks, benefits and common or important side effects of the medication and follow up as appropriate.
 - a. Discuss the use of adjunctive medication, if indicated, to control analgesic side effects, e.g., anti-emetics, laxatives, antacids. Emphasize the importance of developing a plan with the provider to address these issues as appropriate.
 - b. Emphasize that excess sedation and euphoria are not goals of palliative pharmacologic therapy.
4. Discuss any significant drug/drug, drug/food, and alcohol interactions, as appropriate.
5. Discuss the importance of keeping a list of all current prescriptions and over-the-counter medicines, vitamins, herbs, traditional remedies, and supplements.

Encourage the patient to bring this list and pill bottles to appointments for medication reconciliation.

6. Discuss patient/family concerns about addiction. Explain the difference between psychological addiction and physical dependence upon prescribed pain medications. Reinforce that addiction is psychological dependence on a drug; and is not equivalent to tolerance or physical dependence.

PM-MNT MEDICAL NUTRITION THERAPY

OUTCOME: The patient and family will understand the specific nutritional intervention(s) needed for treatment or management of pain management.

STANDARDS:

1. Explain that Medical Nutrition Therapy (MNT) is a systematic nutrition care process provided by a Registered Dietitian (RD) that consists of the following:
 - a. Assessment of the nutrition related condition.
 - b. Identification of the patient's nutritional problem.
 - c. Identification of a specific nutrition intervention therapy plan.
 - d. Evaluation of the patient's nutritional care outcomes.
 - e. Reassessment as needed.
2. Review the basic nutrition recommendations for the treatment plan.
3. Discuss the benefits of nutrition and exercise to health and well-being.
4. Assist the patient/family in developing an appropriate nutrition care plan.
5. Refer to other providers or community resources as needed.

PM-N NUTRITION

OUTCOME: The patient/family will understand the role of nutrition and pain management.

STANDARDS:

1. Explain that constipation is a common side-effect of opiates. Dietary measures such as increased water, increased fiber, increased fruit juices and decreased intake of milk products may be helpful.
2. Review the patient's prescribed diet, if applicable. Refer to a registered dietitian for MNT.

PM-P PREVENTION

OUTCOME: The patient/family will understand the source of pain in relation to the appropriate disease process. They will make a plan to avoid the precipitating factors, minimize disease progression, promote healing; and/or maximize coping strategies.

STANDARDS:

1. Discuss the importance of fully participating in treatment plan for an acute injury to reduce the risk of residual chronic pain.
2. Discuss good body mechanics in order to reduce risk of musculoskeletal injuries.

PM-PSY PSYCHOTHERAPY

OUTCOME: The patient/family will understand the treatment options available for psychotherapy as related to pain management.

STANDARDS:

1. Explain that the therapist and the patient will jointly establish the type of therapy, goals, ground rules, and duration of therapy.
2. Discuss symptoms of grief reaction, e.g., vigilance, trouble concentrating, hyperattentiveness, insomnia, distractibility. Explain that the patient/family may need additional support, sympathy, time, attention, compassion, and communication.
3. Explain that if anti-depressant drugs are prescribed by the provider, full participation with the treatment regimen is important to maximize the effectiveness of the treatment.
4. Explain that many mechanisms for dealing with grief and depression are available. Refer to resources as appropriate, e.g., support groups, traditional healer, bio-feedback, yoga, healing touch, herbal medicine, laughter, humor, guided imagery, massage, acupuncture, acupressure.

PM-TE TESTS

OUTCOME: The patient/family will understand the planned tests that may be performed, including indications and impact on further care.

STANDARDS:

1. Explain the specific test ordered and collection method.
2. Explain the necessity, benefits and risks of the test to be performed and how it relates to the course of treatment.
3. Explain any necessary preparation and instructions for the test ordered.
4. Explain the meaning of the test results, as appropriate.

PM-TX TREATMENT

OUTCOME: The patient/family will understand the treatment options and will participate in the design of the treatment plan, goals, and expected results.

STANDARDS:

1. Discuss with the patient/family the risks and benefits of noninvasive and alternative pain relief measures, e.g., medications, TENS units, heat, cold, massage, meditation, imagery, acupuncture, healing touch, traditional healer, hypnosis.
2. Discuss with the patient/family the possible appropriate procedural or operative pain management techniques, e.g., nerve block, intrathecal narcotics, local anesthesia.